

MOTOR SURVEY ASSIGNMENT

Date 05/08/2024 **Our Ref No.** D24006810MFCV

Accident Date 31-07-2024 Claim Type Third Party

Insured Vehicle GBC8535G Third Party Vehicle SMF9288S

Survey Location EUROKARS AUTO PTE LTD Contact Person WONG CHUN WEI

5 UBI CLOSE (S) 408605

Contact No. 63310680 **Fax No.**

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Contact Person Fax No. 68416315

Contact Number 62563561

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

WP

Surveyor

Cc: Workshop EUROKARS AUTO PTE LTD Attention WONG CHUN WEI

Officer Incharge RACHELWU

IMPORTANT NOTE

Kindly submit the survey report by **email only** to <u>surveyor@msfirstcapital.com.sg</u> within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.